

ARIZONA FORM
A-4

Employee's Arizona Withholding Percentage Election

1998

Type or print your full name	Your social security number
Home address (number and street or rural route)	
City or town, state, and ZIP code	

Arizona Withholding Percentage Election Options (choose only one).

1. ☐ My annual compensation is \$15,000 or more. I choose to have Arizona withholding at the rate of ☐ 17% ☐ 20% ☐ 22% ☐ 28% ☐ 32% of the federal tax withholding. **(check only one box)**
2. ☐ My annual compensation is less than \$15,000. I choose to have Arizona withholding at the rate of ☐ 10% ☐ 17% ☐ 20% ☐ 22% ☐ 28% ☐ 32% of the federal tax withholding. **(check only one box)**
3. ☐ I hereby elect an Arizona withholding percentage of zero for 1998 payroll periods beginning on or after August 21, 1998, and I certify that I meet **BOTH** of the following qualifying conditions for this election:
 - I had NO Arizona tax liability for the taxable year 1997, AND
 - I expect to have NO Arizona tax liability for the taxable year 1998.

I certify that I have made the percentage election marked above.

Signature _____ Date _____, 19 _____

ADOR 06-0041 (98)

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